A motion to use funding requested for I-Homes to fund respite care for Seriously Emotionally Disturbed children.

move to:

Increase the funding for respite care for Seriously Emotionally Disturbed children to support case management and room and board. Funding is to be obtained by reducing the funding, by like amount, form the I-Homes program.

Funding as provided below:

Fiscal Impact of Motion for the 2015 Biennium	FY 2014			FY 2015		
	General Fund	Federal Fund	Total	General Fund	Federal Fund	Total
Mental Health Services	\$300,000	\$0	\$300,000	\$300,000	\$0	\$300,000
Room and Board	\$350,000	<u>\$0</u>	<u>\$350,000</u>	<u>\$350,000</u>	<u>\$0</u>	<u>\$350,000</u>
Total expense	<u>\$650,000</u>	<u>\$0</u>	<u>\$650,000</u>	<u>\$650,000</u>	<u>\$0</u>	<u>\$650,000</u>

Language:

kplanation:

Therapeutic group home and therapeutic foster care providers receive two payments for those children in placement; one daily rate for mental health treatment services and one daily rate for room and board coasts. Medicaid reimburses for the mental health treatment services, but room and board payment is only available if the child is in the custody of child and Family Services (DPHHS) or under court ordered supervision by Youth Court Services.

This motion would provide room and board for children not covered by the above.



Six Month Follow Up- After Discharge from the PRTF Waiver

This graph shows a total of <u>45</u> kids; 18 of whom weren't yet at the 6 month post discharge; leaving 27 kids for whom they have "results".

41% were in PRTF

19% in a Group Home

TOTAL: 60% of kids discharged from the PRTF Waiver were in out of home care (PRTF or Group Home) 6 months after discharge from the program.



Discharge Reason

This pie chart shows the discharge reasons for 42 kids.

21% Returned to PRTF

14% Went to Group Home

TOTAL: 35% discharged to PRTF or Group Home

19% were discharged for reasons related to "Medication Stability"- What does that mean?

24% of families chose not to continue (perhaps their needs weren't being met?)

ONLY 3 OUT OF 42 WERE DISCHARGED BECAUSE THEY "NO LONGER NEEDED LEVEL OF CARE"- 7 % This Reason for Discharge would be the most important indicator of a "successful discharge".



Acute Hospitalization During Participation in the PRTF Waiver

This graph showed the number for <u>58</u> kids.

56% had no stays in Acute

43% had one or more stays in Acute hospitalization

7% had three stays in Acute

From the above numbers, (particularly the 6 month follow-up and the discharge reasons), this program doesn't seem to represent any startling, positive results. It has been in place for several years, spent hundreds of thousands of dollars, produced numerous new positions within the CMHB, but has not shown any demonstrable outcomes in decreasing the number of kids in PRTF, Group Home or other services.

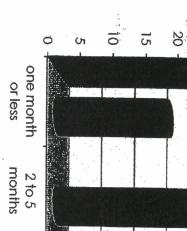
1 year 7-11 months 6 months 2 to 5 months one month or less over 1 year

17 29 7 12 4

8

Participation Length in PRTF Waiver current & discharged youth as of 4/11

K125

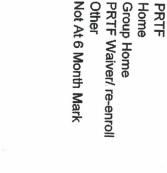


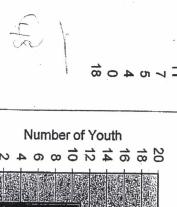
6 months

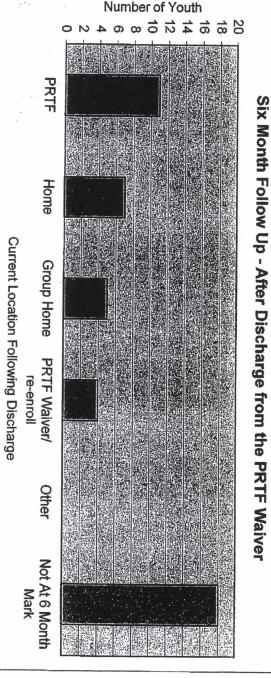
7-11 months

1 year over 1 year

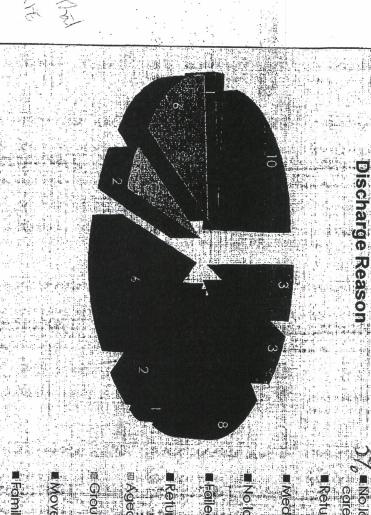
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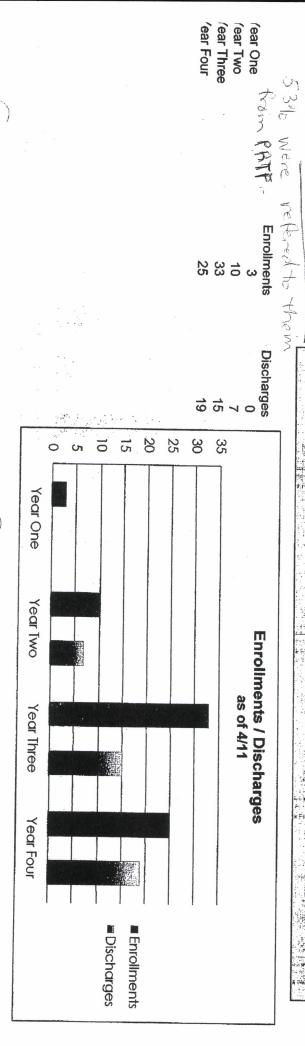






Vo longer needed level of care
Return to PRTF/Parental Choice
Wedication Stability
Vo longer Medicaid eligible
Failed Placement
Return to PRTF/Safety
Aged Out
Group home
Woved
Family chose to not continue





H

o longer needed level of

3iological Parent -oster 3iological Family Member Adoptive

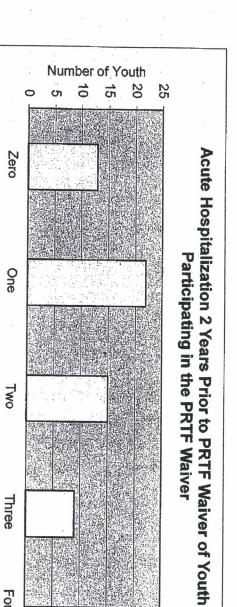
2 6 2 4

Biological Family Member, 13

Biological Parent, 64

Living Environment of All Youth Referrals

Adoptive, 14



Number of Stays

Four or More

Three

13 15 13

our or More

Zero One

